

Please type a plus sign (+) inside this box → ☐**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/927,175	
	Filing Date	08/10/2001	
	First Named Inventor	Robert A. Diciara	
	Group Art Unit	1775	
	Examiner Name	Gwendolyn A. Blackwell-Rudasill	
Total Number of Pages in This Submission		Attorney Docket Number	7784-000171

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Return-Receipt Postcard.
Remarks		The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Mark A. Frentrup	Reg. No.	41,026
Signature					
Date	Jan 16, 2003				

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.			
Typed or printed name	Mark A. Frentrup		
Signature		Date	1/16/03

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 PATENT & TRADEMARK OFFICE

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual review.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09 927,175</td> </tr> <tr> <td>Filing Date</td> <td>08 10 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Robert A. Dichiara</td> </tr> <tr> <td>Examiner Name</td> <td>Gwendolyn A. Blackwell-Rudasill</td> </tr> <tr> <td>Group Art Unit</td> <td>1775</td> </tr> <tr> <td>Attorney Docket No.</td> <td>7784-000171</td> </tr> </table>		Application Number	09 927,175	Filing Date	08 10 2001	First Named Inventor	Robert A. Dichiara	Examiner Name	Gwendolyn A. Blackwell-Rudasill	Group Art Unit	1775	Attorney Docket No.	7784-000171
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TOTAL AMOUNT OF PAYMENT (\$) 110															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p><input type="checkbox"/> Deposit Account</p> <p> Deposit Account Number: 08 0750 Deposit Account Name: Harness, Dickey & Pierce, P.L.C. </p> <p> The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account </p>				<p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1151</td> <td>130</td> <td>1151</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1152</td> <td>50</td> <td>1152</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1153</td> <td>130</td> <td>1153</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1151</td> <td>110</td> <td>1151</td> <td>65</td> <td>Extension for reply within first month</td> <td>110</td> </tr> <tr> <td>1152</td> <td>410</td> <td>1152</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1153</td> <td>930</td> <td>1153</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1154</td> <td>1,450</td> <td>1154</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1155</td> <td>1,970</td> <td>1155</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>320</td> <td>1401</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>1402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>250</td> <td>1403</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>1452</td> <td>55</td> <td>Petition to revive - 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*for number previously paid, if greater. For Reissues, see above

<p>SUBMITTED BY</p>				<p>Complete, if applicable</p>	
Name (Print Type)	Mark A. Frentrup	Registration No. Attorney Agent	41,025	Telephone	(248) 641-1600
Signature				Date	1/1/03

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.**
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